

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>D.B.</i>	<i>2000</i>	<i>10-20-00</i>
O.I.P.E. CLASSIFIER		<i>49</i>	<i>10/16/00</i>
FORMALITY REVIEW	<i>A.M.</i>	<i>580</i>	<i>11-07-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	✓ 3/5/02
2	✓
3	✓
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Best Available Copy

If more than 150 claims or 10 actions
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